

PATENT APPLICATION DATA ENTRY FORM

INVENTOR INFORMATION

Inventor One Given Name:: **Wilhelm**
Family Name:: **Aichele**
Name Suffix::
Postal Address Line One:: **Mozartstrasse 12**
Postal Address Line Two::
City:: **Crailsheim**
State or Province::
Country:: **Germany**
Postal or Zip Code:: **74564**
City of Residence:: **Crailsheim**
State or Prov. of Residence::
Country of Residence:: **Germany**
Citizenship Country:: **Germany**

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: **20028**
Name Line One:: **Barry R. Lipsitz**
Name Line Two::
Address Line One: **755 Main Street**
Address Line Two: **Building 8**
City:: **Monroe**
State or Province:: **Connecticut**
Country:: **United States**
Postal or Zip Code:: **06468**
Telephone:: **(203) 459-0200**
Fax:: **(203) 459-0201**
Electronic Mail::

APPLICATION INFORMATION

Title Line One:: **CUTTING DEVICE AND CUTTING TOOL**
Total Drawing Sheets:: **6**
Formal Drawings?:: **YES**
Application Type:: **Utility**
Docket Number:: **HOE-678**
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?::

REPRESENTATIVE INFORMATION

Representative Customer Number:: **20028**

PRIOR FOREIGN APPLICATIONS

Foreign Application One:: **101 09 933.9**
Filing Date:: **February 21, 2001**
Country:: **Germany**
Priority Claimed:: **Yes**